The Closing Group: A Therapeutic Recreation Program

**PI/Project Director**  
Laraine Putman, RN, LMSW

**Nursing Homes Involved**  
Robinson Terrace

**Description of Intervention**

The Closing Group, a therapeutic recreation program for residents with diagnosed dementia and behavior issues interfering with quality of life, was designed to eliminate environmental factors that enable distressed reactions at times of peak unit activity corresponding with sundowning behaviors.

A room was updated with soft lighting, neutral colors, and solid carpet to create a less stimulating environment than the nursing home unit. The group met Tuesday through Saturday from 2:30 p.m. to 4:30 p.m., with two staff and eight participants (those lost to attrition were replaced). Resident driven activities included socializing in a circular arrangement, singing, listening to music, looking at pictures, sponge painting, yarn rolling, hand holding, balloon toss, and other forms of physical contact/exercise. Reminiscence and validation therapy were also used by staff to foster communication.

**Research Design**

**Research Method** – Single group design with a baseline and repeated measures during the intervention. It was hypothesized that the Closing Group would be associated with an increase in social interaction among participants and a decrease in psychotropic use, restraint use, and anxiety/agitation. Stability or improvement in cognitive status and mood were also predicted.

**Sample** – 16 residents with dementia who met the following inclusion criteria: Mini Mental State Examination score of 10-25, severe rating on the Global Deterioration Scale, behavioral symptom(s) interfering with daily functioning requiring frequent staff intervention, a score of at least 1 and severity of 5 on the Cohen-Mansfield Agitation Inventory, and the ability to communicate basic needs/respond to stimulation. Informed consent was provided by a legal surrogate or family member. Residents were asked if they wished to join the group prior to each session.

**Measures** – A project assistant completed the Cohen-Mansfield Agitation Inventory, Mini Mental State Examination, Global Deterioration Scale, and Cornell Scale for Depression in Dementia at baseline and quarterly during the intervention. Ratings of social interaction, anxiety, weepiness, and restraint use were logged on daily tracking sheets in group. Medication records were reviewed on each participant for the duration of the project. A family satisfaction survey and staff survey specific to the group were conducted at its conclusion.

**Analysis Approach** – Median scores at baseline were compared to the median of quarterly intervention scores via the Wilcoxon signed ranks test. Binomial tests were used to compare the probability of high versus low ratings of social interaction, anxiety, weepiness, and restraint use during the intervention period. The relationship between medication usage and length of program participation was tested with Pearson’s correlation coefficient ($r$). Responses derived from family and staff surveys were qualitatively presented.

**Results**

No significant changes were found for cognitive status, mood, restraint reduction, or medication usage. However, participants remained stable in these areas over the course of the project, with no restraints used on approximately half of all person days in group. A significant decrease in agitation was seen in conjunction with the intervention ($p \leq .05$). Anxiety and weepiness rarely occurred in the Closing Group, and social interaction improved slightly during its course. Staff and family surveys further noted that residents who participated were more calm/interactive.

**Contact Information**

Laraine Putman, RN, LMSW  
(607) 652-7521  
robinson@telnet.net